

OR

Return with \$10.00 license fee to:

City of Brighton

Tax Preparer Address:

GENERAL BUSINESS LICENSE APPLICATION

Submit this application if you are applying for a business not physically located in the City of Brighton. The City of Brighton Business License also serves as your sales tax license. Note this application is not for a contractor's license. For contractor licenses please contact the City's Building Division.

E-mail to SalesTax@Brightonco.gov and

Pay \$10.00 fee by phone (MasterCard or Visa)

The City has a license fee of \$10.00. Issued licenses expire at the end of every-odd numbered year, unless otherwise specified or sooner revoked and must be renewed if the license holder remains engaged in business in the City of Brighton.

Attention Sales Tax 303-655-2041 500 S 4th Ave Brighton, CO 80601 **GENERAL INFORMATION** Proposed Start Date Reason for filing application: □ New Business ☐ Change of location in Brighton: ☐ Expansion of current business ☐ Change of ownership □ Other Desired reporting □ Annual (service only / minimal tax due) Do you need the City to mail you □ Yes Frequency: ☐ Quarterly (tax due is \$40/month or less) blank sales tax returns? □ No ☐ Monthly (tax due is more than \$40/month) Please provide a general description of your business: **BUSINESS INFORMATION** Business Name (Or sole proprietor name): DBA (Doing Business As): Business Address (*No PO Box*, include unit # if applicable): City State Zip Mailing Address (If different than above): City State Zip Business E-mail: Business Phone #: State Sales Tax #: Type of Business: ☐ Individual/Sole Proprietor □ Corporation □ Partnership □ Non-Profit \Box LLC Federal ID #: □ Other: TAX PREPARER INFORMATION If Applicable Tax Preparer Name: Tax Preparer E-mail: Tax Preparer Phone #:

City

State

Zip



OWNERS/OFFICERS Confidential Information – will not be filed under open records				
Name:	Title	Phone #:		
Address	City	State	Zip	
Name:	Title	Phone #:	Phone #:	
Address	City	State	Zip	
Name	Title	Phone #:	Phone #:	
Address	City	State	Zip	
Name	Title	Phone #:	Phone #:	
Address	City	State	Zip	

AFFIRMATION AND SIGNATURE					
I declare, under the penalty of perjury in the second degree, and by signature affixed hereto, that this application is complete and accurate to the best of my knowledge and belief, and that the statements made herein are made in good faith pursuant to the Colorado tax laws and regulations.					
Signature of Owner/Officer or Authorized Rep	Printed Name	Title	Date		

If you have questions regarding this application please contact the City of Brighton Sales Tax Division by e-mail: <u>SalesTax@Brightonco.gov</u> or phone 303-655-2041. In-person by appointment only. To schedule an in-person appointment go to Calendly.com/brightonco-tax-licensing.

REMINDERS:

- Additional fees, forms and/or approvals may be required depending on your proposed business activity.
- This application is NOT for a contractor's license. For contractor licenses please contact the City of Brighton's Building Division at 303-655-2017 or 1stop@brightonco.gov. A general business license is required in addition to a contractor's license if non-permitted work will be performed in the City of Brighton.